

FREEDOM OF INFORMATION REQUEST FOR PUBLIC RECORDS

To: City of Gaffney
P. O. Box 2109
Gaffney, SC 29342

Email: cityclerk@cityofgaffney-sc.gov

FOIA Activity		Associated Charges
Search Retrieval Time Per Hour		\$17.50
Black & White Copies	8 ½" x 11"	10¢ per page
	8 ½" x 14"	13¢ per page
	11" x 17"	20¢ per page
Color Copies	8 ½" x 11"	42¢ per page
	8 ½" x 14"	42¢ per page
	11" x 17"	75¢ per page
DVD Copy		\$15.00 per DVD
Accident Report		\$5.00 each copy
Standard Maps/Plots	Up to 11" x 17"	\$10.00 each
	24" x 36"	\$20.00 each

Description of records requested: Copies of all reports, notes, prepared by any city attorney or city official, including Gaffney County Police Dept; copies of all interviews of witnesses, either written or recorded, colored photographs, if taken, copies of any videos, if taken, by the city attorney or city official, including Gaffney County Police Dept regarding their investigation commencing on 10/07/2019. Case 1902637, involving Limestone College and events that transpired during September 2012 - October 2013, Offense Code 16-17-470(A)

Are you asking for these records for a commercial use/purpose? ☐ Yes ☒ No
SC Law provides that it is a crime to knowingly obtain or use personal information from a public body for commercial solicitation.

Please indicate the format in which you would like the City to respond to your request. Please know the City may not be able to accommodate the requested format. Cost from fee schedule may be applied to any of these formats.

☐ Inspection Only ☒ Hard Copy ☐ Email: _____
☐ Fax: _____ ☐ Other Format: _____

By my signature, I hereby state that I have received information about the City of Gaffney's FOIA process and a copy of the Fee Schedule outlining possible charges I may incur as part of this request.

Signature: Tyler S Thompson

Date: 12/30/2019

Printed Name: Tyler S Thompson

Phone No.: (502) 244-7772

For Office Use Only:

Date Received _____ **Due Date** _____ **Response Date** _____

Department and Staff Member Responsible for Response _____

EXHIBIT B

Gaffney Police Department

201 North Limestone Street

Gaffney, SC 29342

(864) 489-8115



Case Glnc1902637

Printed on December 31, 2019

Status	Approved
Report Type	Incident
Primary Officer	Gaby Bridges
Investigator	Brian Blanton
Reported At	10/10/19 10:07
Incident Date	10/07/19 10:07 - 10/10/19 11:00
Incident Code	Peeping Tom
Location	1115 College Dr, GAFFNEY, SC 29340 (Limestone College College Dr)
Zone	
Beat	
Disposition	Under Investigation
Disposition Date/Time	10/10/19 10:26
Review for Gang Activity	None
Status Indicator	Administrative Filler
Status Change Date	10/10/19

Offense Information

Offense	SEX/PEEPING VOYEURISM OR AGGRAVATED VOYEURISM
Statute	16-17-470(A)
SCIBRS Code	370 - Pornography/Obscene Material
Counts	1
Date	10/10/19
Include In NIBRS	Yes
Completed	Yes
Bias Motivation	None (no bias)
Location	School - College/University
Entry Forced	No
Criminal Activities	Cultivating/Manufacturing/Publishing
DID YOU FILL OUT THE SCIBRS CODE?	YES

Complainant

LIMESTONE COLLEGE

1115 COLLEGE DR
GAFFNEY, SC 29340

(864) 488-4608 Business

(864) 488-8344 Cell

16-17-470(A) - SEX/PEEPING VOYEURISM OR
AGGRAVATED VOYEURISM

Victim

Gaffney Police Department

201 North Limestone Street

Gaffney, SC 29342

(864) 489-8115



Case Notes

Printed on December 31, 2019

Brian Blanton, 10/14/19 10:14

CONTACTED SLED ON 10/10/2019 WHO ADVISED PORNHUB IS A CANADIAN BASED COMPANY WHO DOESN'T COMPLY WITH US ISSUED COURT DOCUMENTS.

Brian Blanton, 10/14/19 15:28

Contacted Alderson Broaddus University in reference to Collin Murphy who was investigated for a similar incident.

Brian Blanton, 10/14/19 15:42

Contact Tiffany Durst who was the lawyer who represented Alderson Broaddus in the Civil Suit in WV.

Victim Notification Information

GAFFNEY POLICE DEPARTMENT

AGENCY I.D. SC 0110200

Victim Information		Case # <u>1902037</u>
Name of Victim: <u>Limestone College</u>	Victim is <input type="checkbox"/> deceased or <input type="checkbox"/> minor	
Mailing Address: <u>1115 College Drive Gaffney SC 29340</u>		
Telephone #: (H) <u>864-4888344</u> (B) _____ Emergency #: _____		
Relative or Contact Person: _____		
Mailing Address: _____		
Telephone #: (H) _____ (B) _____ Emergency #: _____		
Additional Information or Comments: _____		

In order for Law Enforcement to make a reasonable attempt to contact you of the arrest or detention and of the appropriate bond or other pretrial release hearing or procedure, it is your responsibility to notify the appropriate agency of any change in your address or phone number.

The information given on this form will be provided to the jail, prison, detention or holding facility having physical custody of the defendant. It will also be made available to the prosecuting agency and the Department of Juvenile Justice System, if the defendant is a juvenile.

Court Date Information (if available at time of report)

State vs _____	Warrant # / Ticket # _____
Date and Time: _____	Location: _____

An arrest or juvenile detention can occur anytime during a 24 hour period. Arraignment may take place within several hours of the arrest. A juvenile detention hearing is usually held within 48 hours of the detention, excluding holidays and weekends. Please check the boxes below if you do or do not wish to be notified.

I do ☒ I do not ☐ wish to be notified when the defendant is arrested and when arraignment of juvenile detention hearing may take place, anytime day or night.

I do ☒ I do not ☐ wish to be contacted when bond is set, anytime day or night.

I do ☒ I do not ☐ wish to be contacted when the defendant is released from jail, anytime day or night.

As a victim of crime I have received a copy of the Victim Notification Information Form provided to me by the Gaffney Police Department and I agree that the victim information is correct. I have also received a copy of the 1997 Victims and Witness Services Statute.

<u>[Signature]</u> Signature of person receiving information	<u>10/20/19</u> Date
<u>[Signature]</u> Signature of Reporting Officer	<u>10/10/19</u> Date

EXHIBIT B